

# Tobacco Associated Cancers – Data Brief

## Vermont Cancer Registry

### Background

Tobacco use increases the risk for many types of cancer, particularly lung cancer. Lung cancer is the most common tobacco associated cancer in Vermont. Cancer is the leading cause of death in Vermont. Lung cancer is the leading cause of cancer death in Vermont and the United States and is the most preventable form of cancer death. Vermont women have significantly higher rates of lung mortality (deaths) compared to the U.S. rates.

### Deaths, Vermont and U.S., 2007-2011

	Male			Female		
	U.S. Rate	VT Rate	VT Deaths (per year)	U.S. Rate	VT Rate	VT Deaths (per year)
All Cancer Sites	211.6	213.4	686	147.4	152.2	636
Lung and Bronchus	61.6	61.3	201	38.5	45.5	187

### Incidence of Tobacco Associated Cancers

Other than lung cancer, tobacco also increases the risk for cancers of the mouth, lips, nose and sinuses, larynx (voice box), pharynx (throat), esophagus, stomach, colon and rectum, pancreas, cervix, uterus, ovary, bladder, kidney, and acute myeloid leukemia.

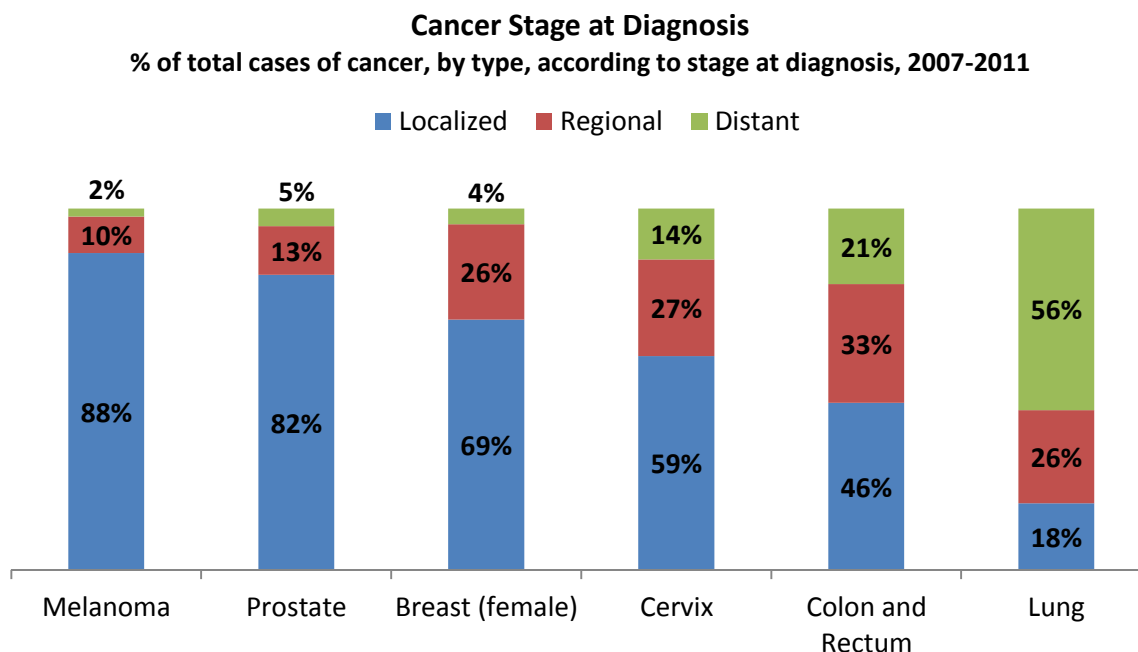
### Tobacco Associated Sites, Vermont and U.S., 2007-2011

	Male			Female		
	U.S. Rate	VT Rate	VT Cases (per year)	U.S. Rate	VT Rate	VT Cases (per year)
All Tobacco Associated Sites	246.4	240.0	818	185.8	195.6	795
Oral Cavity and Pharynx	16.9	16.0	61	6.3	6.5	26
Esophagus	8.4	9.2	32	1.9	2.2	9
Stomach	9.3	6.0	19	4.6	2.8	11
Colon and Rectum	50.1	43.6	149	37.9	36.1	148
Pancreas	13.8	14.6	50	10.7	11.2	46
Larynx	6.5	7.2	26	1.4	1.6	7
Lung and Bronchus	78.7	77.6	260	54.6	64.3	260
Cervix	--	--	--	7.8	4.3	15
Uterus	--	--	--	25.0	30.9	127
Ovary	--	--	--	12.0	11.7	47
Urinary Bladder	36.7	40.1	133	9.1	11.2	46
Kidney	21.4	20.8	73	11.2	9.7	39
Acute Myeloid Leukemia	4.6	4.9	16	3.2	3.1	12

Vermont men have significantly lower rates of stomach and colorectal cancer and higher rates of bladder cancers compared to the U.S. rates. Vermont women have significantly lower rates of stomach and cervical cancers and higher rates of lung, bladder, uterus and all tobacco associated cancers compared to the U.S. rates.

## Stage at Diagnosis

Lung cancer has a very poor prognosis, with the majority of individuals diagnosed at a distant stage. Nationally, 54 percent of men and women whose lung cancer is diagnosed at a localized stage survive their cancer for at least five years, compared to 4 percent of those diagnosed at a distant stage (Source: SEER Cancer Statistics Review).



The U.S. Preventive Services Task Force recently recommended annual screening for lung cancer for adults aged 55 to 80 years who have a 30 pack-year smoking history and currently smoke or have quit within the past 15 years.

## Technical Notes

All rates are age adjusted to the 2000 U.S. standard population and exclude basal cell and squamous cell skin cancers. Incidence rates exclude in situ carcinomas except urinary bladder. Incidence and mortality data were coded using the International Classification of Disease (ICD) for Oncology (ICD-O) and ICD Tenth Revision (ICD-10) coding systems, respectively. Vermont cases and deaths include Vermont residents only. A reporting delay by Department of Veterans Affairs (VA) has resulted in incomplete reporting of Vermont VA incident cases in 2011.

Sources: Vermont Cancer Registry, Vermont Department of Health (1994-2011). National Program of Cancer Registries (NPCR) and Surveillance, Epidemiology, and End Results (SEER) Program - Incidence State Restricted Access Data File (1999-2011). Vermont Vital Statistics System, Vermont Department of Health (1994-2011). SEER Program Mortality - Aggregated Total U.S. (1969-2011).

For more information please visit <http://healthvermont.gov/cancer> or contact Jennifer Kachajian, MA, MPH at [Jennifer.Kachajian@state.vt.us](mailto:Jennifer.Kachajian@state.vt.us).